

PTO/SB/21 (09-04)

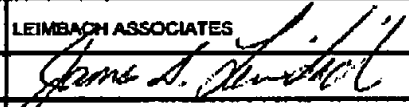
Approved for use through 07/31/2006. OMB 0851-0031

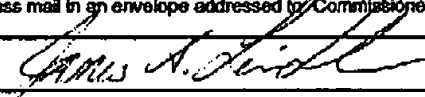
U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	08/773,131	<b>RECEIVED</b> <b>CENTRAL FAX CENTER</b>  <b>NOV 24 2004</b>
	Filing Date	01/31/2001	
	First Named Inventor	Michael Marcel Jose Deora	
	Art Unit	1762	
	Examiner Name	Kirsten Jolley	
Total Number of Pages in This Submission	8	Attorney Docket Number	PHNL000078

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmitted Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks Enclosed is a response to an Office Action.		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	LEIMBACH ASSOCIATES		
Signature			
Printed name	James D. Leimbach		
Date	November 24, 2004	Reg. No.	34,374

CERTIFICATE OF TRANSMISSION/MAILING	
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:	
Signature	
Typed or printed name	James D. Leimbach
Date	November 24, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to be (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:  
Michael Marcel Jose Decre

Serial No. 09/773,131

Filed: 01/31/2001

TITLE: METHOD OF MANUFACTURING A  
CIRCULAR OPTICAL STORAGE DISC  
AND CIRCULAR OPTICAL STORAGE  
DISC

) Atty. Docket PHNL 000078

) Group Art Unit:  
) 1762

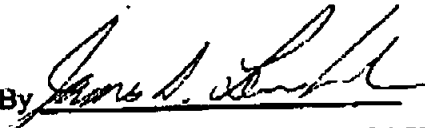
) Examiner:  
) Kirsten Jolley

**RECEIVED**  
**CENTRAL FAX CENTER**  
**NOV 24 2004**

VIA FACSIMILE TRANSMISSION TO (703) 872-9306  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

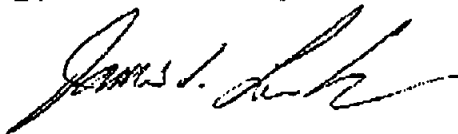
Dear Sir:

This transmission contains a response to the Office Action dated August 24, 2004. The Applicants submit the following Amendment and Remarks for the above referenced application.

By   
James D. Leimbach, Reg. No. 34,374  
Patent Attorney (585) 381-9983

**CERTIFICATE OF TRANSMISSION**  
I hereby certify that this correspondence  
is being transmitted on this date via  
facsimile transmission to (703) 872-9306 AND addressed to:  
**COMMISSIONER OF PATENTS**  
P.O. Box 1450  
Alexandria, VA 22313-1450

Date of Transmission: October 7, 2004



(Signature)

Serial No. 09/773,131

1